Renewal

APPLICATION FOR INDEPENDENT LIVING EDUCATION AND TRAINING VOUCHER (ETV) FUNDS

NAME:			
ADDRESS:			
TELEPHONE:DO	OB:	SSN:_	
SCHOOL ATTENDING		YEAR II	N SCHOOL
WHAT IS YOUR MAJOR AND	MINOR IN?		
LAST SEMESTER'S GRADE A	AVERAGE:_		
ENCLOSED_YES NO_	WHY NOT		
PAST ETV FUNDS AWARDED) <u>\$</u>	DATE OF AWA	ARD
LAST DATE OF CONTACT WI LEARNING CENTER STAFF:			
OTHER AGENCIES YOU ARE	INVOLVED) WITH:	
The following informate for the school year, or	or the instit		
TO BE COMPLETED BY THE BUDGET PERIOD			
Item 1. Dorm room supplies (linen	ı, etc)		Amount
2. Books			
3. Supplies (lab equipment, e	etc)		
4. Meal plan			

Bus tokens – Parking Permit		
6. Tuition		
7. Student fees - Activity card		
8. Room and board		
9. Transportation cost		
10. Tutoring	-	
11. employment related necessities	<u>-</u>	
12. Childcare		
13. Tools necessary for the trade		
14. On-line education/internet fees		
15. Computers		
	TOTAL:	
LIST SCHOLARSHIPS OBTAINED		
OTHER SOURCES OF FUNDING:		
TOTAL AMOUNT OF FINANCIAL NEED:		
TOTAL AMOUNT OF FINANCIAL NEED.		-
FINANCIAL AID OFFICER:	DATE	
I AUTHORIZESchool name	TO RELEASE MY I	NFORMTION.
TO: Child Protection Services		
700 Governors Drive	Signature of Youth	

I understand that by signing this form I accept responsibility for doing my part of the Educational and Training Voucher program.				
SIGNATURE:	DATE			
IL SECTION USE ONLY				
APPROVED BY:	DATE:			
TITLE:				
COMMENTS:				

MAIL TO: